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Date of Deposit: April 2, 2002

Attorney's Docket No: B0192/7011

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Gordon et al.
Serial No: 09/468,647
Filed: December 21, 1999
For: VASCULAR ENDOTHELIAL GROWTH FACTOR-X
Examiner: J. Andres
Art Unit: 1643
Conf. No.: 3881

Commissioner for Patents
Washington, D.C. 20231

Sir:

Transmitted herewith are the following documents:

- ☒ Amendment
- ☒ Plasmid Deposit Receipt (LBMP 3991)
- ☒ Certified Copy of Priority Document
- ☒ Petition for Three Month Extension of Time
- ☒ Copies of the references cited in the IDS filed February 5, 2001
- ☒ Transmittal sheet showing filing of cited references on February 5, 2001
- ☒ Check in the amount of \$920.00
- ☒ Return Receipt Postcard

If the enclosed papers are considered incomplete, the Mail Room and/or the Application Branch is respectfully requested to contact the undersigned at (617) 720-3500, Boston, Massachusetts.

A check for \$920.00 to cover the extension of time fee is enclosed. If the fee is determined to be insufficient, the balance may be charged to the account of the undersigned, Deposit Account No. 23/2825. A duplicate of this sheet is enclosed.

Respectfully submitted,

By: John R. Van Amsterdam
John R. Van Amsterdam, Reg No. 40,212
Wolf, Greenfield & Sacks, P.C.
600 Atlantic Avenue
Boston, MA 02210
Telephone (617) 720-3500

Docket No. B0192/7011
Dated: April 2, 2002
X04/02/02

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For: VASCULAR ENDOTHELIAL GROWTH FACTOR-X
Examiner: Unknown
Art Unit: 1643

CERTIFICATE OF MAILING UNDER 37 C.F.R. §1.8(a)

The undersigned hereby certifies that this document is being placed in the United States mail with first-class postage attached, addressed to the Commissioner for Patents, Washington, D.C. 20231, on the 5th day of February, 2000.


Monica E. Zombori

Commissioner for Patents
Washington, D.C. 20231

Sir:

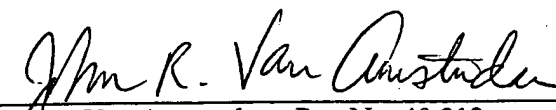
Transmitted herewith are the following documents:

- ☒ Information Disclosure Statement
- ☒ Form PTO-1449 and References Cited
- ☒ Return Receipt Postcard

If the enclosed papers are considered incomplete, the Mail Room and/or the Application Branch is respectfully requested to contact the undersigned at (617) 720-3500, Boston, Massachusetts.

No check is enclosed. If a fee is determined to be required, the balance may be charged to the account of the undersigned, Deposit Account No. 23/2825. A duplicate of this sheet is enclosed.

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Dated: February 5, 2001
xNDD